81864.0026

Customer No.: 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gouichi NISHIZAWA, et al.

Serial No:

10/675,797

Confirmation No.: 2234

Filed:

September 29, 2003

For:

METHOD FOR MANUFACTURING R-T-B SYSTEM

RARE EARTH PERMANENT MAGNET

Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Art Unit:

1742

Examiner:

John P. Sheehan

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop

AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

May 18, 2006 Date of Deposit

Firoozeh Vakilzadeh

Name

Signature

Nitoo lila

Date

5/18/06

Transmitted herewith is an amendment in the above-identified application.

Copy of the 1449's fled with the non-compliant references and the complete copies of the references.

No additional fee is required. M

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FE	LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	· 6	-	20	**	0	LG=\$50 SM=\$25	\$	\$	0	
INDEPENDENT CLAIMS FEE	1	1-1	3	***	0	LG=\$200 SM=\$100	\$	\$	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180								\$	0	
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$250 FOR EACH ADDITIONAL 50 SHEETS								\$	0	
		-	<u> </u>			то	TAL	\$	0	

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$____0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$____0 to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims M

Any patent application processing fees under 37 C.F.R. § 1.17 X

Respectfully submitted,

HOGAN & HARTSON L.L.P

Dariush G. Adli Registration No. 51,386

Attorney for Applicant(s)

Date: May 18, 2006

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